UNITED STATES HOUSE OF REPRESENTATIVES

Form A

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## SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling \$200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding \$1,000. See examples below.

Exclude: Military pay (such as National Guard or Reserve pay), federal retirement programs, and benefits received under the Social Security Act.

Source Type Am	Туре	Amount
	Approved Teaching Fee	\$6,000
State of Maryland	Legislative Pension	\$9,000
ole (Oct. 2nd)	Spouse Speech	\$1,000
Ontario County Board of Education	Spouse Salary	NA
STATE OF FLORIDA FRS	RETIREMENT	14.4B7
	SPANE RETIREMENT	7,656

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# SCHEDULE II—PAYMENTS MADE TO CHARITY IN LIEU OF HONORARIA

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Ethics. A green envelope for transmitting the list is included in each Member's filing package.

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SCHEDULE III—ASSETS AND "UNEARNED" INCOME Continuation Sheet (if needed)

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		SP.	BLOCK A Asset and/or Income Soul
	WACHOVIA BANK COMMUNITY EDUCATIONS [REDIT UNION STOCK POSEY & CO. TRENCIAS STOCK TOCKLEDGE TREACTY CARP STOCK TLATING OAKS COLOR. STOCK TLATING OAKS COLOR. STOCK ROCKLEDGE COLUMN CLUG		BLOCK A Asset and/or Income Source
		None   \$1 - \$1,000   \$1,001 - \$15,000   \$15,001 - \$50,000   \$50,001 - \$100,000   \$100,001 - \$250,000   \$250,001 - \$500,000   \$250,001 - \$1,000,000   \$500,001 - \$1,000,000   \$500,001 - \$5,000,000   \$5,000,001 - \$5,000,000   \$5,000,001 - \$50,000,000   \$5,000,001 - \$50,000,000   \$5,000,001 - \$50,000,000   \$5,000,001 - \$50,000,000   \$5	BLOCK B Year-End Value of Asset
		Over \$50,000,000  NONE  DIVIDENDS  RENT  INTEREST  CAPITAL GAINS  EXCEPTED/BLIND TRUST  TAX-DEFERRED  Other Type of Income (Specify: e.g., Partnership Income or	BLOCK C Type of Income
		None       -         \$1 - \$200       =         \$201 - \$1,000       =         \$1,001 - \$2,500       ₹         \$2,501 - \$5,000       ₹         \$5,001 - \$15,000       ₹         \$15,001 - \$50,000       ₹         \$50,001 - \$100,000       ₹         \$100,001 - \$1,000,000       ₹         \$1,000,001 - \$5,000,000       ★	BLOCK D  Amount of Income
		Over \$5,000,000 ≚	BLOCK E Transaction

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## SCHEDULE IV— TRANSACTIONS

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Check Box if Capital Gain Exceeded \$200  10-12-11															NONE	$\sqcup$	Asset	income. If only a portion of an asset is sold, please so indi- "partial sale"). See example below.  ains — if a sales transaction resulted in a capital gain in excess heck the "capital gains" box and disclose this income on Schedule	a capital loss. Provide a brief description of any exchange trans- clude transactions between you, your spouse or dependent chil-	y purchase, sale, or exchange transactions by you, your spouse, ent child during the reporting period of any security or real proptor investment that exceeded \$1,000. Include transactions that
Check Box if Capital Gain Exceeded \$200  10-12-11																		PURCHASE		of Tr
Check Box if Capital Gain Exceeded \$200  10-12-11															1	×		SALE		Type ansac
Gain Exceeded \$200																		EXCHANGE		ction
\$1,001- \$15,000																		Check Box if ( Gain Exceeds	Capital ed \$200	,
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\$50,000,000 Over \$50,000,000			-				-									╀	_	\$50,000,000 Over		

#### SCHEDULE V— LIABILITIES

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mortgages on personal residences. Report liabilities of over \$10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. Exclude: Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; liabilities of a business in which you own an interest (unless you are personally liable); and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report revolving charge accounts (i.e., credit cards) only if the balance at the close of the preceding calendar year exceeded \$10,000. NOTE: Pending legislation may require Members to report

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				CHASE FINANCIAL	Example: First Bank of Wilmington, DE	Creditor	
				MARCH		Liability Incurred Mo/Year	
				MARCH DR. CARE CANAVERAL	Mortgage on 123 Main St., Dover, DE	Type of Liability	
						\$10,001- \$15,000	
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#### SCHEDULE VI — GIFTS

**Exclude:** Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of \$140 or less need not be added towards the \$350 disclosure threshold. Report the source, a brief description, and the value of all gifts totalling more than \$350 received by you, your spouse, or a dependent child from any source during the year.

Note: The gift rule (House Rule 25, clause 5) prohibits acceptance of gifts except as specifically provided in the rule

Source	Description	Value
Example: Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Ethics)	\$375
NONE		

## **SCHEDULE IV— TRANSACTIONS**

resulted in a capital loss. Provide a brief description of any exchange trans- action. Exclude transactions between you, your spouse or dependent chil- dren, or the purchase or sale of your personal residence, unless it gener- ates rental income. If only a portion of an asset is sold, please so indi- cate (i.e., "partial sale"). See example below.	Report any purchase, sale, or exchange transactions by you, your spouse, or dependent child during the reporting period of any security or real property held for investment that exceeded \$1,000, include transactions that	SCHEDULE IV— TRANSACTIONS
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Box if Capital sceeded \$200		
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								7 010	300					Example: Mega Corporation Common Stock (partial sale)		Capital Gains — if a sales transaction resulted in a capital gain in excess of \$200, check the "capital gains" box and disclose this income on Schedule III.	dren, or the purchase or sale of your personal residence, unless it generates rental income. If only a portion of an asset is sold, please so indicate (i.e., "partial sale"). See example below.	resulted in a capital loss. Provide a brief description of any exchange trans- action. Exclude transactions between you, your spouse or dependent chil-	Report any purchase, sale, or exchange transactions by you, your spouse, or dependent child during the reporting period of any security or real property held for investment that exceeded \$1,000. Include transactions that
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proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner,

tions); and positions solely of an honorary nature. Exclude: Positions listed on Schedule I; positions held in any religious, social, fraternal, or political entities (such as political parties and campaign organiza-

Position	Name of Organization
PREMENT	POSET & CO. (REACTORS)- A FLORIDA CORPORATION
725 Day	<u>~</u>

### SCHEDULE IX—AGREEMENTS

employee welfare or benefit plan maintained by a former employer. government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of

Date		
NONE Parties To		
Terms of Agreement		